

APPLICATION FOR TOURING HISTORIC SAVANNAH, GA.

Date of App	olication:			
Name of Or	rganization/Com	npany:		
Address:				
Contact Person:			Phone Number:	
Local (City	of Savannah) T	our Guide & Company:		
Savannah <i>A</i>	Accommodation	:		
Number of Vehicles: L		License Number:	Color of Vehicle:	
Name of Bu	us Company			
Address of	Bus Co.:	City:	State:	Zip Code:
_ength of Vehicle: Height of Vehicle: _		Height of Vehicle:	Width of Vehicle:	
Date of Tou	ur or Travel in S	avannah:		
Permit Fees: Motorcoach Tour Permit Motorcoach Transportation Permit Multi-day Combination Permit			\$20.00 tour only \$10.00 per day \$30.00 72 hours	
Enclose che	eck or money o	rder made payable to: City	of Savannah.	
Mail to:	City of Sava Transportati Motor Coacl P.O. Box 21 Savannah, (on Office h Permit 01		

Where to obtain a Permit

Monday-Friday from 8:00 a.m. until 5:00 p.m. at 301 M. L. King Jr. Blvd. Permits are issued only when application is completed and check submitted. Permits will not be mailed out. They must be picked up at the rear of the Savannah Visitors Center parking lot. For further assistance, please call (912) 651-4235 or 651-6468.

After 5pm & weekends/holidays, permits may be obtained from the Bryan Street Parking Garage, 100 East Bryan Street at Abercorn Street – across from the Pink House. For further assistance, please call (912) 651-6477.

THIS IS NOT A PERMIT

Permits will not be issued unless application is filled out in its entirety.

No Refunds will be given.

Applications are available on our web site www.savannahga.gov under Mobility & Parking Services/Tours & Shuttle/Motor Coach Permits.